

Work Order ID 100979

April-30-13 2:37:30 PM

100979

Page 1

Item ID: D4035-041

Accept

N900040100

Setup Start

NS1

Revision ID:

Item Name: Lid Rib Assembly, Fwd (350 Basket)

Stop

NS2

Start Date: 5/10/13 Start Qty: 4.00

4/2
4

Cust Item ID:

Required Date: 5/10/13 Req'd Qty: 4.00

Customer:

Reference:

Approvals: Process Plan: M65

Date: 13-05-02 Tooling:

Date:

Run Start

NR1

QC:

Date: SPC (Y/N):

Date:

Stop

NR2

Sequence ID/
Work Center ID

Operation
Description

Set Up/
Run Hours

Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
---------	--------	--------------	---------------	---------------	------------------	----------------

Draw Nbr

Revision Nbr

D4035

A 13.07.08

100

Weld per dwg A/R S.S. rod Batch: M204816

0.00

(2) 13.08.20 PD

100

Large Fab

Memo

0.00

1- Cut D4035-1 as per dwg D4035
2- Drill holes as per dwg D4035 using DT9562 and sink only two holes where indicated on dwg
3- remove identification marks and deburr
4- Weld bushing in rib as per dwg D4035
5- Grind weld on bushing D4021-9 as per dwg

13.07.08

110

QC9- Inspect visual per QSI004- Fusion Welds

0.00

110

QC

Quality Control

Memo

0.00

(1) 13.8.20

(2)

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS												
Part No. _____	Work Order Update	Rework <input type="checkbox"/>	Scrap <input type="checkbox"/>	Use-as-is <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Machining <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Finishing <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/>	Quality <input type="checkbox"/>	Other <input type="checkbox"/>
NCR No. _____																		
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance			Initial Chief Eng	Action Description			Sign & Date	Verification	QC Inspector					
Doc/Data																		
Equip/Tooling																		
Operator																		
Material																		
Setup																		
Other																		
Process																		
Supplier																		
Training																		
Unapproved																		
FAULT CATEGORY																		
Landing Gear				General														
Bending		Bend <input type="checkbox"/>		Grain <input type="checkbox"/>		Ovalized <input type="checkbox"/>		Pressure/Forced <input type="checkbox"/>		Temperature/Cure <input type="checkbox"/>		Weld <input type="checkbox"/>		Wrong Stock Pulled <input type="checkbox"/>				
Centre Not Concentric to O/S		BOM/Route <input type="checkbox"/>		Hardware <input type="checkbox"/>		Over/Under tolerance <input type="checkbox"/>												
Cracks		Broken/Damaged <input type="checkbox"/>		Inspection Incomplete <input type="checkbox"/>		Part Incorrect <input type="checkbox"/>												
Crushed/Crimped		Burrs <input type="checkbox"/>		Instructions Incomplete/Unclear <input type="checkbox"/>		Part Lost/Missing <input type="checkbox"/>												
Cuffs		Contamination <input type="checkbox"/>		Maintenance <input type="checkbox"/>		Part Moved <input type="checkbox"/>												
Heat Treat		Countersink <input type="checkbox"/>		Mislabeled <input type="checkbox"/>		Positioned Wrong <input type="checkbox"/>												
Inspection Strip in Tube		Cut Too Short <input type="checkbox"/>		Misread <input type="checkbox"/>		Power Loss/Surge <input type="checkbox"/>												
Ripples in Bend		Drill Holes <input type="checkbox"/>		Offset <input type="checkbox"/>														
Torque Waves in Extrusion		Drawing <input type="checkbox"/>		Out of Calibration <input type="checkbox"/>														
Turning Sequence		Finish <input type="checkbox"/>		Out of Sequence <input type="checkbox"/>														
Wave/Twist in Tube		Folio <input type="checkbox"/>		Outside Dimensions <input type="checkbox"/>														

Work Order ID 100979***100979***

Page 2

April-30-13 2:37:30 PM

Item ID: D4035-041

Accept

N900040100

Setup

Start

NS1

Revision ID:

Item Name: Lid Rib Assembly, Fwd (350 Basket)

Stop

NS2Start Date: 5/10/13 Start Qty: 4.00 ***4***

Cust Item ID:

Required Date: 5/10/13 Req'd Qty: 4.00 ***4***

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run

Start

NR1

QC:

Date:

SPC (Y/N):

Date:

Stop

NR2Sequence ID/
Work Center IDOperation
DescriptionSet Up/
Run Hours

Tool ID

Tool #

Plan
CodeAccept
QtyReject
QtyReject
NumberInsp.
Stamp

120

120

QC

Quality Control

QC5- Inspect part completeness to step on W/O

0.00

AS

27

9-6

B.8.20

J

130

130

Packaging

Packaging

Identify as per dwg & Stock Location: W1001

0.00

(2) 3-08-20 10

140

140

QC

Quality Control

QC21- Final Inspection - Work Order Release

0.00

0.00

ML5 3-08-21

ML5 3-08-20

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION		AGAINST DEPARTMENT/PROCESS					
Part No. _____	Rework <input type="checkbox"/>	Scrap <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>				
NCR No. _____	Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>					
	Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Supplier <input type="checkbox"/>				
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance		Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data										
Equip/Tooling										
Operator										
Material										
Setup										
Other										
Process										
Supplier										
Training										
Unapproved										
FAULT CATEGORY										
Landing Gear			General							
Bending <input type="checkbox"/>	Bend <input type="checkbox"/>	Grain <input type="checkbox"/>	Ovalized <input type="checkbox"/>	Pressure/Forced <input type="checkbox"/>						
Centre Not Concentric to O/S <input type="checkbox"/>	BOM/Route <input type="checkbox"/>	Hardware <input type="checkbox"/>	Over/Under tolerance <input type="checkbox"/>	Temperature/Cure <input type="checkbox"/>						
Cracks <input type="checkbox"/>	Broken/Damaged <input type="checkbox"/>	Inspection Incomplete <input type="checkbox"/>	Part Incorrect <input type="checkbox"/>	Weld <input type="checkbox"/>						
Crushed/Crimped <input type="checkbox"/>	Burrs <input type="checkbox"/>	Instructions Incomplete/Unclear <input type="checkbox"/>	Part Lost/Missing <input type="checkbox"/>	Wrong Stock Pulled <input type="checkbox"/>						
Cuffs <input type="checkbox"/>	Contamination <input type="checkbox"/>	Maintenance <input type="checkbox"/>	Part Moved <input type="checkbox"/>							
Heat Treat <input type="checkbox"/>	Countersink <input type="checkbox"/>	Mislabeled <input type="checkbox"/>	Positioned Wrong <input type="checkbox"/>							
Inspection Strip in Tube <input type="checkbox"/>	Cut Too Short <input type="checkbox"/>	Misread <input type="checkbox"/>	Power Loss/Surge <input type="checkbox"/>							
Ripples in Bend <input type="checkbox"/>	Drill Holes <input type="checkbox"/>	Offset <input type="checkbox"/>		Other <input type="checkbox"/>						
Torque Waves in Extrusion <input type="checkbox"/>	Drawing <input type="checkbox"/>	Out of Calibration <input type="checkbox"/>								
Turning Sequence <input type="checkbox"/>	Finish <input type="checkbox"/>	Out of Sequence <input type="checkbox"/>								
Wave/Twist in Tube <input type="checkbox"/>	Folio <input type="checkbox"/>	Outside Dimensions <input type="checkbox"/>								

Picklist Print

April-30-13 2:37:30 PM

Page 1

Work Order ID: 100979

Parent Item: D4035-041

Parent Item Name: Lid Rib Assembly. Fwd (350 Basket)

Start Date: 5/10/13

Required Date: 5/10/13

Start Qty: 4.00

Required Qty: 4.00

Comments: IPP RevA: new issue DD 09.11.25 verified by:EC
verified by:EC IPP Rev:B as per dwg revA 10.03.15
IPP Rev:C 13.03.14 AS PER DWG REV.pb1 DD VERF:JLM

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
D2327-3 Spacer Bushing		Manufactured	No			100	Each	40.0000	1	4			13-08-15 PD

Location	Loc Qty	Loc Code
WA004	40	
75564	1	
77229	1	
81144	2	
89384	16	
98701	20	

Location	Loc Qty	Loc Code
WA004	100	149.0000
75564	1	
77229	1	
81144	2	
89384	16	
98701	20	

Location	Loc Qty	Loc Code
WA002	2	
99143	2	

Location	Loc Qty	Loc Code
WA004	147	
66437	2	
70333	4	
72482	4	
82977	1	
84717	3	
88677	23	
88377	7	
92020	12	
98702	17	
98877	74	

D4021-9
Bushing

Manufactured No

13-08-15

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION		AGAINST DEPARTMENT/PROCESS					
			Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/> Prod. Eng. Coor. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/>			
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance		Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data										
Equip/Tooling										
Operator										
Material										
Setup										
Other										
Process										
Supplier										
Training										
Unapproved										
FAULT CATEGORY										
Landing Gear				General						
				Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube <input type="checkbox"/>	Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burr <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio <input type="checkbox"/>	Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions <input type="checkbox"/>	Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/>	Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/>	Other <input type="checkbox"/>	

Picklist Print

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Page 2

Work Order ID: 100979

Parent Item: D4035-041

Parent Item Name: Lid Rib Assembly, Fwd (350 Basket)

Start Date: 5/10/13

Required Date: 5/10/13

M304TS0.750W.049

Purchased

No

100

f

743.6758

1.75

7.3684211

304 SQ Tube .75x.75x.049W

13-08-19 PD

<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
MAT017	113.6758	
124492	113.6758	
WA006	629.9999555	
123484	29.9999555	
125124	600	

M125015 → 363

NCR: Yes / No

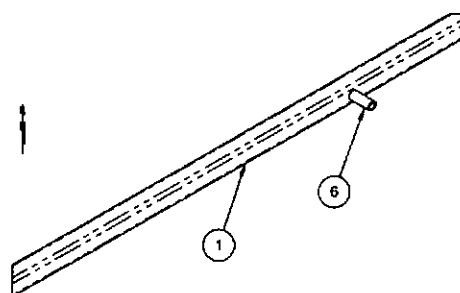
DQA: Date: . .

WORK ORDER NON-CONFORMANCE / UPDATE

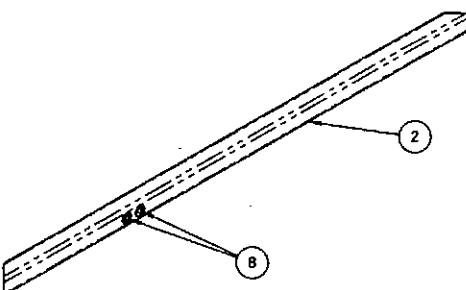
QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION		AGAINST DEPARTMENT/PROCESS									
				Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/> Prod. Eng. Coor. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/>							
Root Cause		Date	Step	Qty	Description of work order update or Non-conformance		Initial Chief Eng	Action Description		Sign & Date	Verification	QC Inspector			
Doc/Data															
Equip/Tooling															
Operator															
Material															
Setup															
Other															
Process															
Supplier															
Training															
Unapproved															
FAULT CATEGORY															
Landing Gear Bending Centre Not Concentric to O/S Cracks Crushed/Crimped Cuffs Heat Treat Inspection Strip in Tube Ripples in Bend Torque Waves in Extrusion Turning Sequence Wave/Twist in Tube				General Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio <input type="checkbox"/>				Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions <input type="checkbox"/>				Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/>		Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/>	
												<input type="checkbox"/> Other			

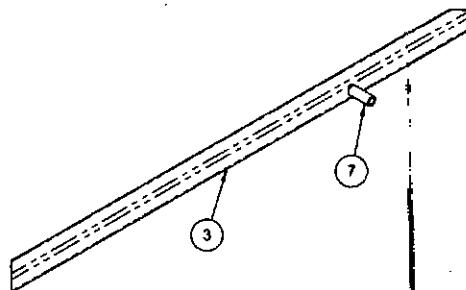
ITEM	QTY -041	QTY -043	QTY -045	QTY -047	P/N	DESCRIPTION
	X				D4035-041	LID RIB ASSY, FWD
		X			D4035-043	LID RIB ASSY, AFT
			X		D4035-045	LID RIB ASSY, FWD (LIGHT)
				X	D4035-047	LID RIB ASSY, AFT (LIGHT)
1	1				D4035-1	RIB
2	1				D4035-3	RIB
3		1			D4035-5	RIB
4			1		D4035-7	RIB
5				2	D4035-11	BUSHING
6	1				D2327-3	SPACER BUSHING
7		1			D2953-175	SPACER
8		2			D4021-9	BUSHING



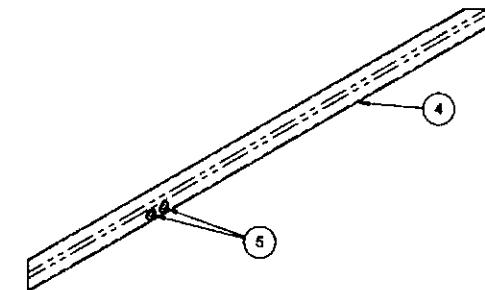
D4035-041 BASKET LID RIB ASSY, FWD



D4035-043 BASKET LID RIB ASSY, AFT



D4035-045 BASKET LID RIB ASSY, FWD (LIGHT)



D4035-047 BASKET LID RIB ASSY, AFT (LIGHT)

RELEASED
2010-03-12
AM

A	NEW ISSUE	JPH	10.03.04
REV.	DESCRIPTION	BY	DATE
DESIGN	AJS	DART AEROSPACE LTD	
DRAWN	JPH	HAWKESBURY, ONTARIO, CANADA	
CHECKED		DRAWING NO.	REV. A
MFG. APPR.		D4035	SHEET 1 OF 5
APPROVED		TITLE	SCALE
DE APPR.		BASKET LID RIB ASSY	NTS
DATE	10.03.04	COPYRIGHT © 2010 BY DART AEROSPACE LTD THIS DOCUMENT IS THE PROPERTY OF DART AEROSPACE LTD. IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT DART AEROSPACE LTD'S EXPRESS WRITTEN PERMISSION	

